

TRANSMITTAL FORM

(be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| | |
|----------------------|---------------------|
| Application Number | 10/004,194 |
| Filing Date | October 31, 2001 |
| First Named Inventor | Schoeb , Reto |
| Art Unit | 1744 |
| Examiner Name | Beisner, William H. |

Attorney Docket Number 015258-048710US

ENCLOSURES (Check all that apply)

- Fee Transmittal Form
 - Fee Attached
- Amendment/Reply
 - After Final
 - Affidavits/declaration(s)
- Extension of Time Request
 - Express Abandonment Request
 - Information Disclosure Statement
 - Certified Copy of Priority Document(s)
 - Response to Missing Parts/ Incomplete Application
 - Response to Missing Parts under 37 CFR 1.52 or 1.53

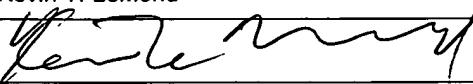
- Drawing(s)
- Licensing-related Papers
- Petition
- Petition to Convert to a Provisional Application
- Power of Attorney, Revocation Change of Correspondence Address
- Terminal Disclaimer
- Request for Refund
- CD, Number of CD(s)

- After Allowance Communication to Group
- Appeal Communication to Board of Appeals and Interferences
- Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- Proprietary Information
- Status Letter
- Other Enclosure(s) (please identify below):
 - Return Postcard
 - Substitute Specification
 - Comparison Copy

Remarks

The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

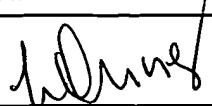
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|--------------------|---|--|
| Firm or Individual | Townsend and Townsend and Crew LLP Kevin T. LeMond | |
| Signature |  | |
| Date | 3/9/04 | |

Reg. No. 35,933

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

| | | | |
|-----------------------|---|------|--------|
| Typed or printed name | Lata Olivier | | |
| Signature |  | Date | 3/9/04 |

60161677 v1

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 475

Complete if Known

| | |
|----------------------|---------------------|
| Application Number | 10/004,194 |
| Filing Date | October 31, 2001 |
| First Named Inventor | Schoeb , Reto |
| Examiner Name | Beisner, William H. |
| Art Unit | 1744 |
| Attorney Docket No. | 015258-048710US |

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order Other None
 Deposit Account:

Deposit Account Number 20-1430

Deposit Account Name Townsend and Townsend and Crew LLP

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Description | Fee Paid |
|---------------------|---------------|------------------------|----------|
| Fee Code (\$) | Fee Code (\$) | | |
| 1001 770 | 2001 385 | Utility filing fee | |
| 1002 340 | 2002 170 | Design filing fee | |
| 1003 530 | 2003 265 | Plant filing fee | |
| 1004 770 | 2004 385 | Reissue filing fee | |
| 1005 160 | 2005 80 | Provisional filing fee | |
| SUBTOTAL (1) | | \$ | |

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | Independent Claims | Multiple Dependent | Extra Claims | Fee from below | Fee Paid |
|--------------|--------------------|--------------------|--------------|----------------|----------|
| | | | | | |
| | | | | | |
| | | | | | |

| Large Entity | Small Entity | Fee Description |
|---------------------|---------------|--|
| Fee Code (\$) | Fee Code (\$) | |
| 1202 18 | 2202 9 | Claims in excess of 20 |
| 1201 86 | 2201 43 | Independent claims in excess of 3 |
| 1203 290 | 2203 145 | Multiple dependent claim, if not paid |
| 1204 86 | 2204 43 | ** Reissue independent claims over original patent |
| 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) | | \$ |

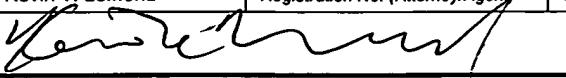
**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

| 3. ADDITIONAL FEES | | | |
|-----------------------------------|--------------|--|---------------------|
| Large Entity | Small Entity | Fee Description | Fee Paid |
| Fee Code | Fee (\$) | Fee Description | |
| 1051 | 130 | Surcharge - late filing fee or oath | |
| 1052 | 50 | Surcharge - late provisional filing fee or cover sheet. | |
| 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | For filing a request for reexamination | |
| 1804 | 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 | 110 | Extension for reply within first month | |
| 1252 | 420 | Extension for reply within second month | |
| 1253 | 950 | Extension for reply within third month | |
| 1254 | 1,480 | Extension for reply within fourth month | 475 |
| 1255 | 2,010 | Extension for reply within fifth month | |
| 1401 | 330 | Notice of Appeal | |
| 1402 | 330 | Filing a brief in support of an appeal | |
| 1403 | 290 | Request for oral hearing | |
| 1451 | 1,510 | Petition to institute a public use proceeding | |
| 1452 | 110 | Petition to revive – unavoidable | |
| 1453 | 1,330 | Petition to revive – unintentional | |
| 1501 | 1,330 | Utility issue fee (or reissue) | |
| 1502 | 480 | Design issue fee | |
| 1503 | 640 | Plant issue fee | |
| 1460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | Petitions related to provisional applications | |
| 1806 | 180 | Submission of Information Disclosure Stmt | |
| 8021 | 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 | 770 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 770 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 1801 | 770 | Request for Continued Examination (RCE) | |
| 1802 | 900 | Request for expedited examination of a design application | |
| Other fee (specify) | | | |
| *Reduced by Basic Filing Fee Paid | | | SUBTOTAL (3) |
| | | | (\$475 |

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|---|-----------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Kevin T. LeMond | Registration No. (Attorney/Agent) | 35,933 | Telephone | 415-576-0200 |
| Signature |  | | Date | 3/9/04 | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.